

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

☒ Ms.

☒ yes

☐ no

☐ Mr. Artist

SUSAN WIDEN

Permanent

(Last Name Last)

Address

1883 FULHAM DR. MAYFIELD HTS

Street

City

44124

Tel. (216) 461-4024

Zip

Area Code

Temporary or

Studio Address

Street

City

Tel. ()

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in?

Collaborator

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist C.O.D. at this address:

Mrs. Kaufman 461-4024

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

Mrs. Kaufman

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 17, 1983.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature

Susan Widen

DO NOT DETACH

DO NOT DETACH

ENTRY BLANKS

1

- ☐ 1. Paintings ☐ 2. Graphics ☒ 3. Photography
☐ 4. Sculpture ☐ 5. Crafts

Materials

Black & White
Silver Print

Title

Hollow Man

Price or NFS

115

Insurance Value
if NFS Only

Size

11 x 14

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

9

Total No. in Edition

10

Price
Unframed

90

Price of
Frame

25

ACCEPTED

X

REJECTED

DO NOT WRITE IN THIS SECTION

107 (3)

ACCEPTED

X

REJECTED

2

- ☐ 1. Paintings ☐ 2. Graphics ☒ 3. Photography
☐ 4. Sculpture ☐ 5. Crafts

Materials

Title

WATKINS GLEN

Price or NFS

115

Insurance Value
If NFS Only

Size

11 x 14

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

9

Total No. in Edition

10

Price
Unframed

90

Price of
Frame

25

ACCEPTED

REJECTED

X

DO NOT WRITE IN
THIS SECTION

ACCEPTED

REJECTED

RECEIVED

YBN

DATE

5/13 83

DETACH

1983 MAY SHOW
The Cleveland Museum of Art
Cleveland, Ohio 44106

SUSAN WIDEN

Name

1883 Fulham DR.

Address

MAYFIELD HTS., OH.

City & State

44124

Zip

This is your only receipt to claim your object(s).

NOTIFICATION #2

DO NOT
DETACH

1

☐ 1. Paintings

☐ 2. Graphics

☒ 3. Photography

☐ 4. Sculpture

☐ 5. Crafts

Title

HOLLOW MAN

DO NOT WRITE IN THIS SECTION

107(3)

ACCEPTED

X

REJECTED

2

☐ 1. Paintings

☐ 2. Graphics

☐ 3. Photography

☐ 4. Sculpture

☐ 5. Crafts

Title

WATKINS GLEN

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

RETURN OF OBJECTS:

REJECTED: MAY31- JUNE 4

ACCEPTED: JULY 25-30

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.